

(See DCD 220-004 for details. Allowable quantity listed is the maximum for General Population, combination of State-issued & personal property.)

Inmate Name Johnson, Earl Number 252782 Institution MCTC

Inventory Reason:  Transfer In  Transfer Out  Segregation  Release from Segregation  Hospital  Escape  
 Out in Custody  Other ASPA #3475, 142655, 142601, 142618, 13106, 13109

Item	Allow Quant	Item	Allow Quant	Item	Allow Quant	Item	Allow Quant
<b>CLOTHING</b>		<b>APPLIANCES &amp; ACCESSORIES</b>				<b>RECREATIONAL MATERIALS</b>	
Belt 2" Buckle (no logos)	1	Alarm Clock	1	Toothbrush holder	1	Art Brushes	5
Bras, state issue	7	Antenna, TV	1	Over the counter Meds – includes: Aspirin/Tylenol (pack), Antacid (pack), Cough drops (bag), Vitamins – Multiple (container) (no amino or creatine) (Total combined)	8	Art Set	1 set
Coat, Jacket	1	Batteries (as needed plus 1 additional set)	As req.	<b>HYGIENE ITEMS</b>		Board Games/Dominoes (no dice)	1
Footwear (any combo Athletic Shoes, Shower Shoes, Slippers, Sandals)	4	Beard/mustache trimmer and attachments	1	Hygiene items (aftershave lotion, bunion & callus pads, chapstick, contact lens cleaner, contact lens solution, cotton swabs, dental loops, denture adhesive & cleaner, deodorant, eye wash, hair conditioner & dressing, mouthwash, shampoo, shaving cream, skin cream & lotion, soap, talcum powder, toothpaste) (Total)	30	Chess Set (solid) \$20	1
Handkerchiefs	6	Book Light	1			Guitar w/wo case \$150	1
Hat (knit style)	1	Calculator	1			Guitar Strings (exchange only)	
Hat (baseball style)	1	Cassette tapes, or CDs commercially recorded factory sealed - no DVDs	8			Harmonica w/case \$25	1
Hat (stretch style) Male	2	Extension Cord or 1-outlet Surge Protector (9 feet max)	1			Jigsaw Puzzle	2
Hat (rain bonnet) Female	1	Fan	1			Playing Cards (decks)	2
Pajama Sets (nightgown, female only)	2	Game System	1			Support belt / athletic supporter	As req.
Rain Poncho or Raincoat	1	Game Cartridges \$35	6			<b>MEDICAL ITEMS</b> (Quantities Only as Prescribed)	
Shirts (Jerseys, Sweatshirts, Sweaters)	6	Headphones (clear) \$25	1			Dentures and containers	
Shorts, Athletic	4	Radio, AM or AM/FM, w/wo cassette or CD no recording capability or detachable speakers \$75	1			Eyeglasses / Contacts & case	1
Shower Robe	1	Television or TV/AM/FM Combo, w/wo remote \$200	1			Other items (braces, etc.), elastic joint support, other medical items	1
Socks (pair)	9	Typewriter, (or word processor, no detachable monitor or disk) \$250	1			<b>STATIONERY ITEMS</b>	
Special Work Clothing	As Per	Other accessories for appliances (typewriter ribbon, earphone extensions, AC adapters, no universal adapters coax connectors) (As permitted)	As req.	Approved extension course material	As req.	Approved extension course material	
Thermal Underwear (set)	2			Binder (notebook/no metal)	1	Candy, bags	5
Trousers, Pants, Sweatpants, Leisure-style pants (Skirts, female only)	4			Books & papers (personal, religious, legal (Magazines & newspapers included (12" x 12" x 18")	1.5 cu. ft.	Candy, bars	24
Undershirts/Tee-shirts	8					Canned goods & packaged meals (Total)	15
Underpants, Boxers/Briefs	8					Cereals	2
<b>JEWELRY AND PERSONAL ACCES.</b>							
Clothes Hangers (plastic)	6			Books, school (As required)		Coffee, Hot Chocolate individual packs	24
Combination Lock	2			Greeting cards (As approved)		Crackers, Cookies, Cakes (box)	3
Earrings, Pair (females)	1			Pencils/Pens	18	Creamer, non-dairy (box)	2
Religious Articles				Photo Album (no metal)	1	Instant Drinks (containers)	5
Jewelry \$25	1	<b>MISCELLANEOUS</b>				Potato Chips, Popcorn, Pretzels, Nuts	8
Clothing (Female 4)	3	Air Freshener, solid	2	Photograph with frame	1	Pudding (packages)	2
Other	4	Comb	1	Postage Stamps/stamped envelopes	20	Soft drinks, juice (case)	1
Ring, Wedding - \$75	1	Drinking Cup 16 oz. max.	1	Ruler (plastic)	1	Soup Noodles	24
Sewing Kit	1	Hair Brush	1	Scotch Tape rolls	2	Spreads – condiments, mayo, honey, cheese, jelly	6
Shoe/boot laces (spare)	3	Laundry Soap	2	Writing Paper tablets	2	Sweetener (box)	1
Shoe Polish - no wax	1	Mirror (plastic)	1	<b>LINEN ITEMS</b>		Tea bags (box)	1
Shoeshine Brush	1	Nail Clipper (small)	1	Laundry Bag	2	Plastic bowl	1
Shoeshine Cloth	1	Razor (Disposable only)	5	Personal Sheets & Pillow cases (set)	1	Plastic fork & spoon (pack)	1
Sunglasses	1	Roach/Ant motel	3	Towels, hand or bath	6		
Trash can - max 3 gal.	1	Soap Dish (plastic)	1	Washcloths	4		
Wrist watch \$50	1	Toothbrush	2				

I/we, Sweeney Co B, Date 06-07-17, have personally inventoried the above listed items and find this to be true and correct.

I, \_\_\_\_\_, Date \_\_\_\_\_, have checked the above list of property and certify that the

These items were received into my custody and issued to the above-named inmate.



## Department of Public Safety and Correctional Services

### Division of Correction Maryland Correctional Training Center

18800 ROXBURY ROAD • HAGERSTOWN, MARYLAND 21746  
(240) 420-1601 • FAX (301) 797-8574 • TTY USERS 1-800-735-2258 • [www.dpscs.maryland.gov](http://www.dpscs.maryland.gov)

STATE OF MARYLAND

LARRY HOGAN  
GOVERNOR

BOYD K. RUTHERFORD  
LT. GOVERNOR

STEPHEN T. MOYER  
SECRETARY

WILLIAM G. STEWART  
DEPUTY SECRETARY  
ADMINISTRATION

J. MICHAEL ZEIGLER  
DEPUTY SECRETARY  
OPERATIONS

RHEA L. HARRIS  
ASSISTANT SECRETARY  
PROGRAMS AND  
SERVICES

DAVID N. BEZANSON  
ASSISTANT SECRETARY  
CAPITAL PROGRAMS

DIVISION OF  
CORRECTION

YENA M. CORCORAN  
COMMISSIONER

AROLYN J. SCRUGGS  
ACTING DEPUTY  
COMMISSIONER

MARYLAND  
CORRECTIONAL  
TRAINING CENTER

RICHARD D. DOVEY  
WARDEN

STEVEN W. MYERS  
ASSISTANT WARDEN

GEORGE J. MORRIS  
CHIEF OF SECURITY

### MEMORANDUM

**TO:** Earl Johnson, #252782 / SID 335615  
HU7A-1-10

*John Myers AW*  
**FROM:** Richard Dovey, Warden

**DATE:** July 31, 2017

**SUBJECT:** EVENT 2017-0030117-ALLEGED FALSE REPORT

Thank you for your letter that was sent to the Office of the Deputy Secretary regarding Event 2017-0030117. Secretary Zeigler received your correspondence and forwarded your letter to my office for response.

In your letter you state that the officers wrote a false report and you were found not guilty at the hearing. I have reviewed your concerns and found that when this incident occurred, the officer heard you yelling at inmates inviting them to fight and drinking what appeared to be homemade alcohol. When the officer approached you, the smell of alcohol was emanating from your person and he cuffed you without incident. A search of your cell yielded homemade alcohol.

On June 27, 2017, this event was heard and a *plea agreement was reached*; the hearing officer dismissed rule violations 114 and 301, however you were *found guilty* of rule 406. You were sanctioned to 15 days cell restriction. There were pictures and testing strips that were “positive” for alcohol. While a plea agreement was reached this is not a “not guilty” finding, you were, in fact, found guilty of rule 406.

As to your request for names of the officers involved in this event, you may ask your attorney to subpoena the facility for this information.

I hope this provides some level of clarification regarding this matter. If you have any further questions, please feel free to contact my office.

RDD:RS;tlh

c: Rose Thompson, Office of the Deputy Secretary, Operations  
Valerie Ferrell, Inmate Affairs  
Captain Webb, Investigations  
R. Stevenson, Case Management  
Base File  
File

Department of Public Safety and Correctional Services  
Division of Correction  
MCTC  
Institution/ Facility

**Application and Consent Form for Release of Inmate Case Information**



1. Inmate: Earl Johnson DOC#: 252782
2. Inmate Record Release to:  Self  Other Name: \_\_\_\_\_
3. Specific items in the inmate record to be reviewed:  
Copies of pictures of alcohol supposedly found in cell.
4. Reason for reviewing inmate record:  
To file a lawsuit.
5. If my request to review the inmate case record is approved, I agree to use the information only for legitimate purposes and in the furtherance of my official duties. I agree that any information obtained shall not be disseminated to any person not authorized to receive it.  
Earl Johnson Earl Johnson 7-14-17  
Printed Name Signature Date
6. Warden's Decision:  Approve  Disapprove  
Dave 7-14-17  
Warden/ Designee Signature Date
- Comments: Lockers were for use by security. Substance was tested - positive for alcohol
7. Certification: Copies received by or sent to \_\_\_\_\_ on \_\_\_\_\_  
The inmate record was reviewed in my presence by \_\_\_\_\_ (Print Name) (Signature)  
on \_\_\_\_\_  
Staff Member Title \_\_\_\_\_ Date \_\_\_\_\_

**Consent for Release of Inmate Case Record Information  
When not Specifically Governed by ACM**

I understand that my case records are protected under appropriate federal and state confidentiality regulations and cannot be disclosed without my written consent unless otherwise allowed by the aforementioned regulations. I also understand that I may revoke this consent at any time except to the extent action has been taken in reliance on it, and that, in any event, this consent expires automatically, as described below.

Specification of the date, event, or condition upon which this consent expires:

Completed this \_\_\_\_\_ Day of \_\_\_\_\_, 2014

Inmate: \_\_\_\_\_ Witness: \_\_\_\_\_

Distribution: Custodian of Records File  
Inmate Base File

44KL D Johnson Jr 252-482 / 333-083

18800 KET DIA KJ KAD  
Hagerstown MD 19116

RETURN TO SENDER AS  
NOT DELIVERABLE FORWARD

RE-  
TURN TO SENDER  
NOT DELIVERABLE FORWARD  
UNAME TO

A photograph showing a purple ribbon with the words "PURPLE HEART USA" and two Purple Heart medals. The top medal has "U.S. ARMY" and "1942" inscribed on it, while the bottom one has "U.S. ARMY" and "1943".

TN Mate Cleveland Office  
115 Sudderth Lane, Suite 200  
Pikeville, MD 21208-3848

2009年4月号



## Department of Public Safety and Correctional Services

## NOTICE OF INMATE RULE VIOLATION

**INMATE COPY**Inmate Name: EARL  
JOHNSON

SID Number: 335615

Facility Location: Maryland Correctional Training Center

Housing Location: MCTC HU7C\_1\_009\_B

Case Number: 2017-045

Control Number: 252782

Reporting Staff Name: J Steele

Position: COII

Date of Report: 06/07/2017

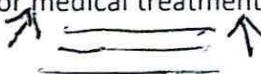
## Reported Facts:

Date of reported conduct: 06/07/2017

Time of reported conduct: 8:30 PM

## Reported Facts:

On the above date and time while watching rec hall on HU 6 Btier I witnessed an inmate later identified as Earl Johnson DOC#252782 SID#335615 drinking what appeared to be homemade alcohol in the rec hall. I witnessed inmate Johnson yelling loudly at several Ramadan inmates and inviting them to fight him. I ordered inmate Johnson out of the rec hall and could smell alcohol on his breath. I ordered inmate Johnson to turn around and behandcuffed to which he complied. After inmate Johnson was handcuffed, myself and Sgt. Calder went to inmate Johnson's cell and discovered numerous single bottles of homemade alcohol and one large bag of homemade alcohol. The suspected alcohol was tested utilizing an alco-screen test which tested at a .3% or higher range. Pictures were taken of the homemade alcohol and the inmate was identified using his DOC ID. Inmate Johnson was escorted to the dispensary for medical treatment.



## Recommended Charge: 114 , 406

## Signature of Reporting Staff :

I solemnly affirm under the penalties of perjury and upon personal knowledge that the facts set forth in the above report are true.

Reporting staff: J Steele COII  
 Print Name and Title

Signature

06/07/2017

Date

## Supervisor Review Action

- Informal Resolution (See Notice on Informal Resolution form served with this document for details.)  
 Formal Hearing (See Notice of inmate Rule Violation And Disciplinary Hearing form served with this document for details.)  
 Recommended Administrative Segregation Assignment Pending Formal Hearing     Use Of Force Reported  
 Contraband Disposition

## Rule Violation Charge :

114.Possess a controlled dangerous substance, intoxicant, or alcohol in sufficient quantity or packaging materials that suggests an intent to distribute or distribution

301.Possess or use alcohol without authorization

406.Possess or pass contraband

## Comments :

Shift Supervisor  E. KRETZER Agent  
 Print Name and Title

*6-12th loc*

06/07/2017

Date

*had me placed in  
sliding cell in medical*

*C-Tier - Laundry room  
wt was making Fadd  
for the Final's NBA*

*6-B-M-A  
6/7/2017  
Ryan Cole*

## Department of Public Safety and Correctional Services

## NOTICE OF INMATE RULE VIOLATION

Inmate Name: EARL  
JOHNSON

SID Number: 335615

Facility Location: Maryland Correctional Training Center

Housing Location: MCTC HU7C\_1\_009\_B

Case Number: 2017-045

Control Number: 252782

Reporting Staff Name: J Steele

Position: COTI

Date of Report: 06/07/2017

## Shift Commander's Administrative Segregation Review:

I have reviewed the above Administrative Segregation recommendation And:  Approve  Disapprove the recommendation.

Shift Commander : J Wilt Agent

Print Name and Title



Signature

06/07/2017

Date

## INMATE HEARING RECORD

Inmate Name: EARL JOHNSON

SID Number: 335615

Date of Report: 06/07/2017

Facility Location: Maryland Correctional Training Center

Event ID Number: 2017-0030117

Case Number: 2017-045

Housing Location: MCTC HU7D\_1\_009\_A

Hearing Officer of Record: David Sipes

Reporting Staff Name: J Steele

Inmate Rule Violation Charged: 301 , 406 , 114

guilty plea was voluntarily made. The Defendant was also informed that the Warden would review the decision and could modify the sanctions upon review. The Defendant understood and pled guilty. Per agreement, the Facility recommended 15 C/R. HO accepts plea and agreement.

**Decision:**

Rule Violation Charge	Hearing Officer Decision
114	Dismissed
301	Dismissed
406	Guilty

**Based upon the credible evidence and findings of facts, provide a written explanation for the Decision:**

The Defendant and Facility reached a plea agreement. The Defendant was informed that by pleading guilty hearing rights and most appeal rights were waived and the Defendant was admitting to the rule violations. The Defendant acknowledged that the guilty plea was voluntarily made. The Defendant was also informed that the Warden would review the decision and could modify the sanctions upon review. The Defendant understood and pled guilty. Per agreement, the Facility recommended 15 C/R. HO accepts plea and agreement.

**Sanction Imposition****Adjustment History:**The defendant inmate's adjustment History is: **Good**

Adjustment History Override: No

**Adjustment History Sentencing Matrix:**

Effective Date :

Rule violation charge	Segregation period	Consecutive/ Concurrent	Credit Revocation
406	0		0

## INMATE HEARING RECORD

Inmate Name: EARL JOHNSON

SID Number: 335615

Date of Report: 06/07/2017

Facility Location: Maryland Correctional Training Center

Event ID Number: 2017-0030117

Case Number: 2017-045

Housing Location: MCTC HU7D\_1\_009\_A

Hearing Officer of Record: David Sipes

Reporting Staff Name: J Steele

Inmate Rule Violation Charged: 301 , 406 , 114

End Date :

## Alternative Sanction:

Rule violation charge	Sanction	Other Sanction	Sanction Period	Consecutive/ Concurrent	Effective Date	End Date
406	Cell Restriction		15		06/07/2017	06/21/2017

## Suspension of Visitation privilege Imposition:

No Records

## Comment:

Name of Hearing Officer: David Sipes

Title: Agent

Date of Decision: 06/27/2017

Inmate Name: EARL JOHNSON SID Number: 335615 Facility Location: Maryland Correctional Training Center  
 Event ID Number: 2017-0030117 Case Number: 2017- Housing Location: Date of Report:  
 045 HU7A\_1\_010\_B 06/07/2017  
 Hearing Officer of Record: David Sipes Reporting Staff Name: J Steele  
 Inmate Rule Violation Charged: 301 , 406 , 114

---

**Warden's Review of Decision****Appeal Received:** Yes

Rule	Hearing
Violation	Officer
Charge	Decision
114	Dismissed
301	Dismissed
406	Guilty

**Warden's Review of Decision :** Affirm Decision**Warden's Review of Sanction****Adjustment History Sentencing Matrix:**

Effective Date :

Rule violation charge	Segregation period	Consecutive/ Concurrent	Credit Revocation	Sanction Suspended
406	0		0	No

**End Date :****Alternative Sanction:**

Rule violation charge	Sanction	Other Sanction	Sanction Period	Consecutive/ Concurrent	Effective Date	End Date	Sanction Suspended
406	Cell Restriction		15		06/07/2017	06/21/2017	No

**Suspension of Visitation privilege Imposition:**

No Records

Inmate Name: EARL JOHNSON SID Number: 335615 Facility Location: Maryland Correctional Training Center

Event ID Number: 2017-0030117 Case Number: 2017-045 Housing Location: Date of Report:  
HU7A\_1\_010\_B 06/07/2017

Hearing Officer of Record: David Sipes Reporting Staff Name: J Steele

Inmate Rule Violation Charged: 301 , 406 , 114

---

**Did the Warden or designee affirm all sanctions? Yes**

**Comments:**

**Remand:** N/A

**Comments:** N/A

**Name of Reviewer:** Richard Dovey

**Title:** Agent

**Date of Review:** 07/06/2017

**Remanded Hearing:** Prior to an appearance, you are entitled to 24 hours from the date and time of your receipt of this notice to prepare for your scheduled hearing. You may be permitted to request: a qualified staff or inmate to represent you, a witness (including reporting staff), and evidence for the purposes of your hearing presentation if you list them by name below. Failure to request representation, a witness, or evidence below at the time of this service shall be deemed a waiver of representation, a witness, or evidence at the time of your hearing. You may appeal a hearing officer's decision and or sanction to the warden within 15 days of the date for your receipt of the decision.

Representative: \_\_\_\_\_ Evidence Request: \_\_\_\_\_

Witness Request: \_\_\_\_\_